



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E473434**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	15-02615	
LOCAL AGENCY CODING	0664	
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION	
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DATE OF COLLISION	10	21	2015	TIME (2400)	1451	COUNTY #	31	MILES	N	E	IN	<input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
STATE ROUTE 9	BLOCK NO. <input checked="" type="checkbox"/>	300
	MILE POST	

DISTANCE		MILES	N	E	OF (REFERENCE OR CROSS STREET)	MARKET PL
		FEET	S	W		

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4258701451
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LAST NAME	SHULTZ	FIRST NAME	LEANDAR	MIDDLE INITIAL	D
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STREET NEW ADDRESS	20227 80TH AVE NE
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CITY	ARLINGTON	ST	WA	ZIP	98223
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CDL		RESTRICTIONS		ENDORSEMENTS	L
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DRIVER'S LICENSE #	SHULTLD122CN	STATE	WA	SEX	M	D.O.B.	02	15	1988
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
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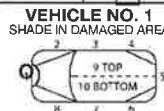
LICENSE PLATE #	B06133K	STATE	WA	VIN#	1B7GL23X2LS669647
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1990	MAKE	DODG	MODEL	N1PU	STYLE	PC	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **LEANDAR SHULTZ 20227 80TH AVE NE ARLINGTON WA 98223**

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE
VEHICLE LEGALLY EXEMPTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4252865307
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LAST NAME	ANDERSON	FIRST NAME	DONALD	MIDDLE INITIAL	J
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STREET NEW ADDRESS	7632 19TH PL SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982583210
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	ANDERDJ202LW	STATE	WA	SEX	M	D.O.B.	06	16	1980
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	301XQE	STATE	WA	VIN#	3VWRM71K08M108788
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2008	MAKE	VOLK	MODEL	JET4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **DONALD ANDERSON 15029 SE 177TH PL RENTON WA 98058**

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE
VEHICLE LEGALLY EXEMPTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PEMCO CA 1600543		



OFFICER'S NAME (PRINT)	C. CHRISTENSEN	BADGE OR ID #	0075	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E473434**

CASE # **15-02615**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MM/DD/YYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MM/DD/YYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MM/DD/YYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES

NARRATIVE

Unit 2 was slowing for traffic stopped at the traffic signal on northbound SR 9 at Market Pl. unit 1 did not see Unit 2 slowing and rear-ended Unit 2. There were no reported injuries and neither vehicle needed to be towed from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

C. CHRISTENSEN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

10-21-15 04:38 PM

DATED

PLACE SIGNED

APPROVED BY

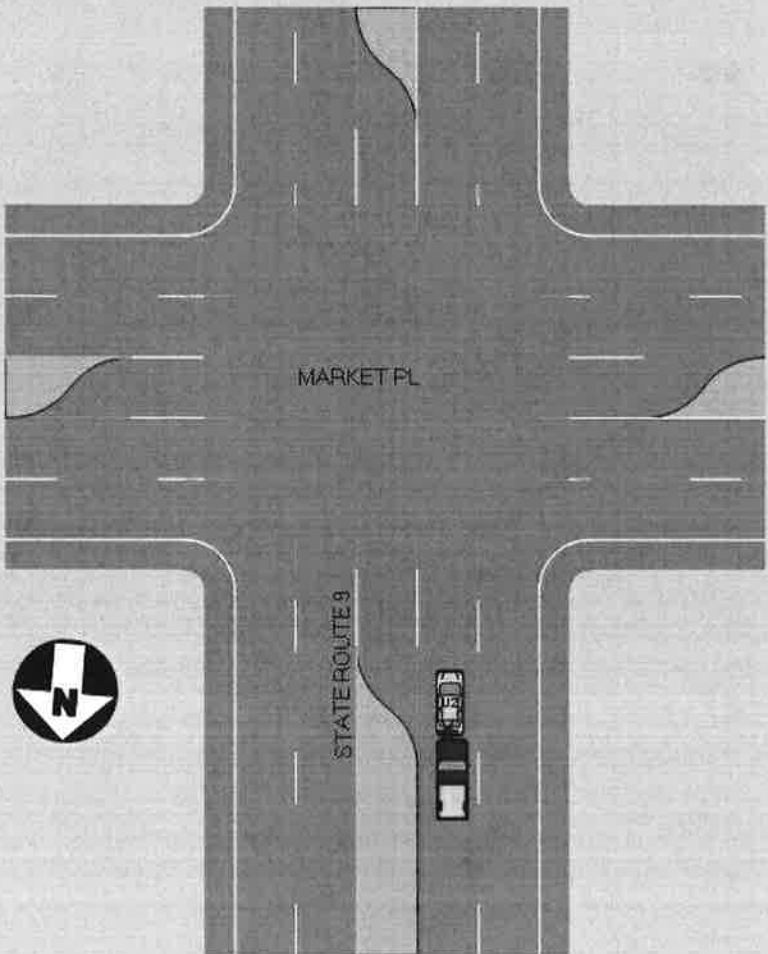
ROBERT MINER 0095

DATE

10/21/2015 10:35:26 PM

BADGE OR ID #	0075	ORI #	WA0311900	TIME POLICE DISPATCHED	2:51 PM	TIME POLICE ARRIVED	2:55 PM
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DRAWING IS NOT TO SCALE



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-02615

VICTIM / WITNESS

NON-DISC ☐ NAME (LAST, FIRST MIDDLE) Anderson Donald J RACE ETH SEX DOB AGE HGT WGT HAIR EYES

STREET ADDRESS 7632 1st Pl SE CITY Lake Stevens WA STATE W.A. ZIP 98058 RES. STATUS

HOME PHONE 425-286-5307 CELL PHONE 425-286-5307 PLACE OF EMPLOYMENT Boeing

WORK PHONE 206-245-9429 EMAIL ADDRESS vanicent@gmail.com

I, Donald J. Anderson, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was stopped at Hwy 8 and market place going south when I was hit from behind by Lee.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: [Signature] DATE SIGNED 10/21/2015 LOCATION SIGNED Lake Stevens Payless shoe store
OFFICER/NUMBER: C. Chua #75 DATE SIGNED 10/21/15 LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-021015

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Shultz Leondar Dave	RACE W	ETH	SEX M	DOB 2-15-1988	AGE 27	HGT 5'8"	WGT 235	HAIR brn	EYES blu
STREET ADDRESS 20227 80th Ave NE #23		CITY Arlington			STATE WA	ZIP 98223	RES. STATUS			
HOME PHONE		CELL PHONE 425-870-1451			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Was driving South on highway 9. light was green, everyone was going then stoped. I was unable to stop in enough time to not reed the car. in front of me.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10/21/15	LOCATION SIGNED Lake Stevens WA.
OFFICER/NUMBER: C. Chua #15	DATE SIGNED 10/21/15	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

Incident History for: #SS15021112

Case Numbers: \$SS15002615

Entered 10/21/15 14:51:02 BY SPCT05 SP0402
Dispatched 10/21/15 14:51:28 BY SPDP17 SP0194
Enroute 10/21/15 14:51:28
Onscene 10/21/15 14:55:05
Closed 10/21/15 15:15:01

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: 9

Loc: 303 91 AV NE , LKS -- PAYLESS SHOES , LKS btwn MARKET PL & SR 204 (V)

Loc Info:

Name: ANDERSON, DONALD

Addr:

Phone: 4252865307

/1451 (SP0402) ENTRY , CC, NON INJ, COL ON SR 9 RP PULLED INTO LOC, OT
HER DRIVER DID GIVE INFO B UT DID NOT HAVE INSUR
ANCE AND LEFT, OTHER VEH IS A OLDER DODGE SUV L/
B06133K , RP WAITING IN A GRY 2008 VW JETTA
/1451 (SP0194) DISPER 19D3 #SS75 CHRISTENSEN, OFCR (CHAD)
/1452 (SS75) REMINQ 19D3 MDTVEH, B06133K, , WA, , , , , , , , , ,
/1452 REMINQ 19D3 MDTWANT, , , , , , WA, SHULTLD122CN, , , , , , , , , ,
/1455 *ONSCNE 19D3
/1500 (SP0333) ASNCAS 19D3 \$SS15002615
/1515 CLEAR 19D3 D/H
/1515 CLOSE 19D3